# Maine Weekly Influenza Surveillance Report

May 22, 2018

Maine Center for Disease Control and Prevention
An Office of the Department of Health and Human Services

For MMWR week 20 (ending 5/19/2018)

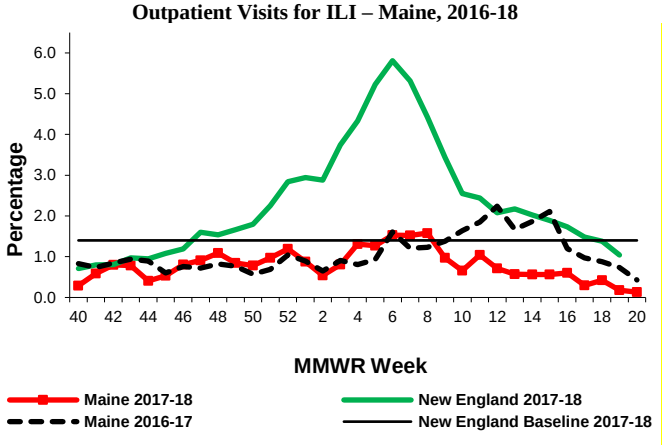
**New This Week**

- Federal Flu Code: Sporadic
- 6 new hospitalizations

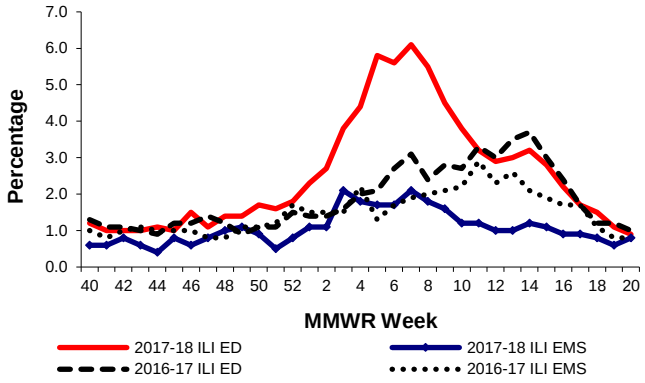
**Surveillance Information – Maine, 2017-2018 Influenza Season**

- Number of ILINet Providers reporting: 16
  - % of visits for Influenza-Like Illness (ILI): 0.13
- Syndromic Surveillance
  - % of Emergency Room visits for ILI: 0.9
  - % of Emergency Medical Services (EMS) runs for ILI: 0.8
- Influenza Hospitalizations
  - # of hospitalizations: 6
- Electronic Death Reporting System
  - % of deaths due to P&I: 8.5

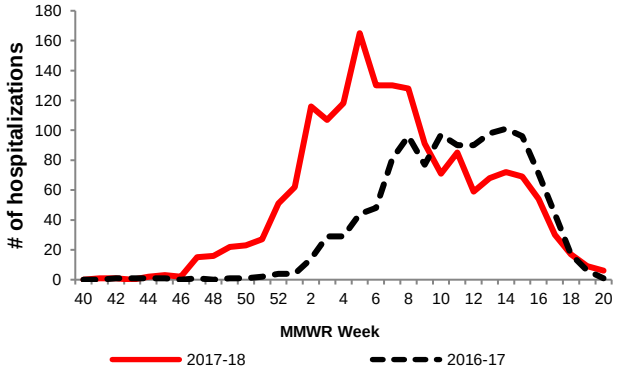
**Outpatient Visits for ILI – Maine, 2016-18**



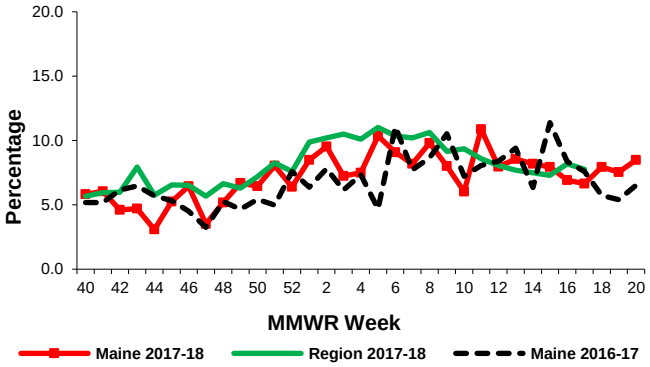

**Syndromic Surveillance data for ILI – Maine, 2016 -18**




**Influenza Hospitalizations – Maine, 2016-18**




**Deaths Attributable to P&I – Maine, 2016-18**



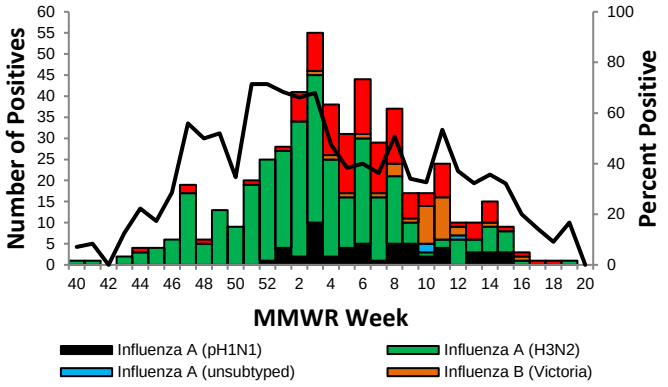



*All data is preliminary and subject to change*

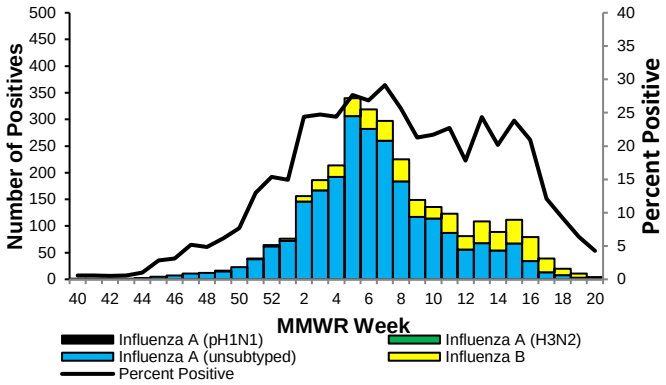
## Lab Data – Maine, 2017-2018 Influenza Season

- # of samples tested at HETL: 5
  - # positive: 0
  - % positive: 0
- # of samples tested at Maine Reference Labs: 94
  - # positive: 4
  - % positive: 4.3
- # of samples positive by rapid antigen test: 22

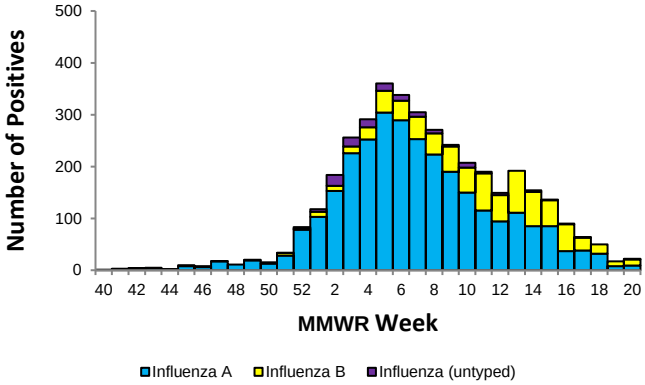
**Positive PCR Samples for Influenza, HETL – Maine, 2017-18**



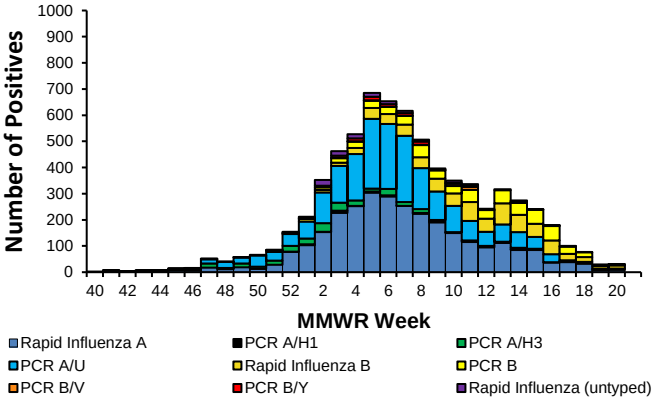

**Positive Samples for Influenza, Maine Reference Labs – Maine, 2017-18**



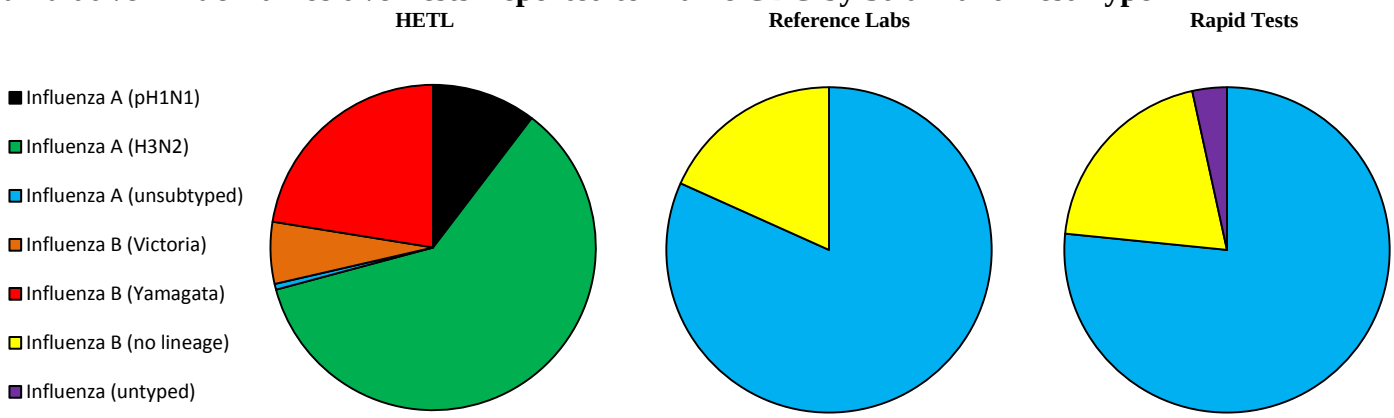

**Positive Influenza Rapid Antigen Tests – Maine, 2017-18**




**All Positive Influenza Results – Maine 2017-18**




## Cumulative Influenza Positive Tests Reported to Maine CDC by Strain and Test Type





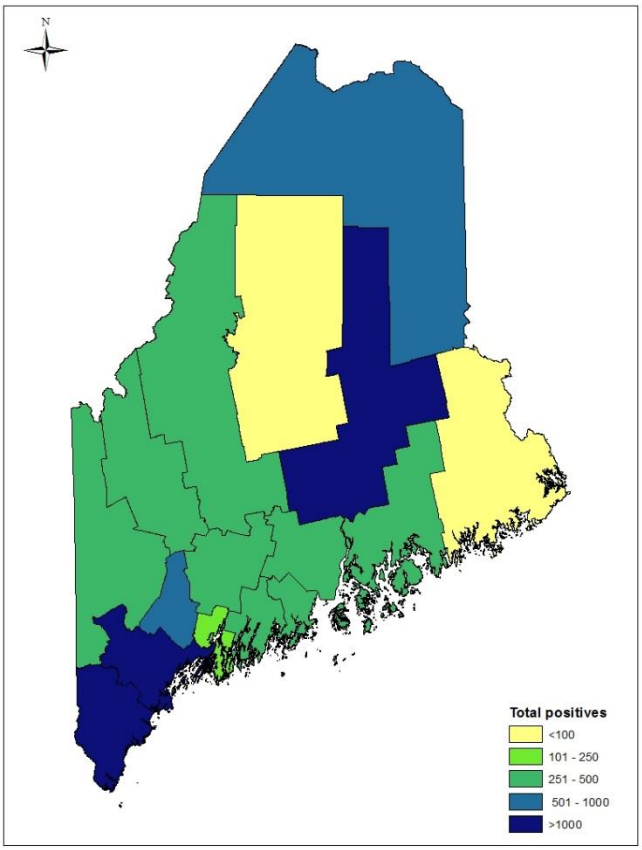

*All data is preliminary and subject to change*

**Geographic Distribution of Lab Tests, Maine 2017-18***

| County | Positive labs | | Hospitalizations | |
|---|---|---|---|---|
| | Tested this week | Total | New this week | Total |
| Androscoggin | 3 | 793 | 1 | 117 |
| Aroostook | 4 | 759 | 1 | 41 |
| Cumberland | 2 | 1317 | 0 | 334 |
| Franklin | 7 | 244 | 0 | 12 |
| Hancock | 0 | 317 | 0 | 62 |
| Kennebec | 0 | 495 | 0 | 69 |
| Knox | 0 | 308 | 0 | 148 |
| Lincoln | 1 | 231 | 0 | 101 |
| Oxford | 3 | 411 | 1 | 140 |
| Penobscot | 8 | 1409 | 2 | 193 |
| Piscataquis | 0 | 54 | 0 | 6 |
| Sagadahoc | 0 | 137 | 0 | 41 |
| Somerset | 1 | 408 | 0 | 55 |
| Waldo | 2 | 265 | 1 | 107 |
| Washington | 0 | 77 | 0 | 24 |
| York | 7 | 1793 | 0 | 300 |
| **Total** | **38** | **9018** | **6** | **1750** |

*Only reported PCR, culture, and rapid antigen tests are included in the chart and map.

**Positive Influenza Tests, Maine 2017-18**



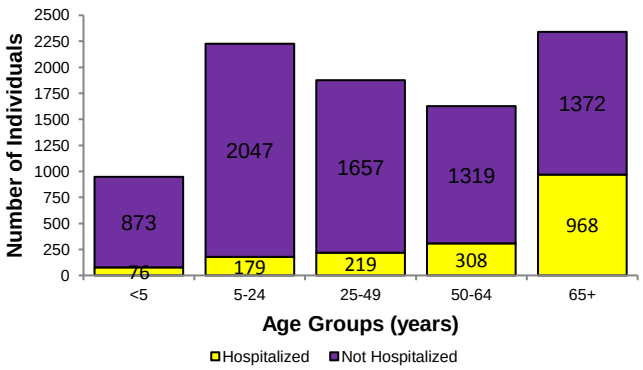

## Antiviral Resistance – Maine, 2017-18 Influenza Season

- # of Influenza A (pH1N1) samples tested for Tamiflu resistance at HETL: 31
  - # with resistance: 0
- # of Influenza A (H3) samples tested for Tamiflu resistance at HETL: 180
  - # with resistance: 0

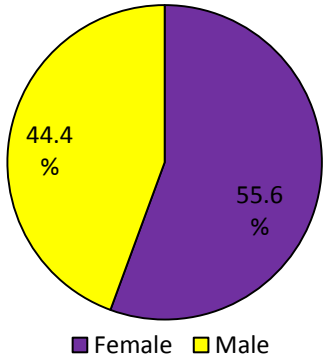
## Age and Gender Information – Maine, 2017-18 Influenza Season

- Minimum Age: 5 days
- Mean Age: 41 years
- Maximum Age: 103 years
- Hospitalized Minimum Age: 5 days
- Hospitalized Mean Age: 60 years
- Hospitalized Maximum Age: 103 years

**Positive Influenza Tests by Age – Maine, 2017-18**




**Positive Influenza Tests by Gender – Maine, 2017-18**






*All data is preliminary and subject to change*

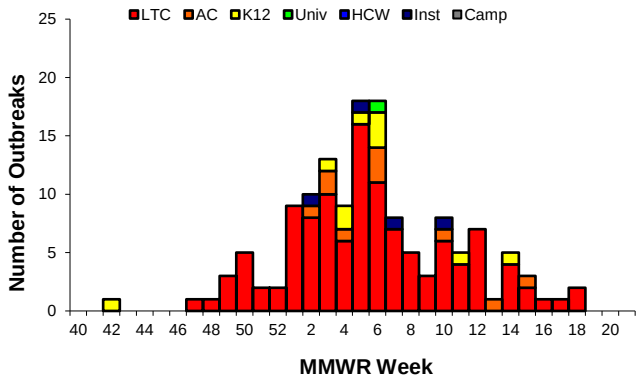
## Antigenic Characterization (Vaccine Strain Match)

- Federal CDC has antigenically or genetically characterized 3,174 influenza viruses from October 1 – May 12, 2018.
    - 100% of influenza A/H1N1 samples match the vaccine strain
    - 93.9% of influenza A/H3N2 samples match the vaccine strain
    - 24.9% of influenza B/Victoria samples match the vaccine strain
    - 100% of influenza B/Yamagata samples match the vaccine strain
- Antigenic characterization shows if the circulating strains are the same strains that were used to make the vaccine. This does not tell you how effective the vaccine is at creating an immune response. For current vaccine effectiveness rates visit https://www.cdc.gov/mmwr/volumes/67/wr/mm6706a2.htm.

## Influenza-Like Illness Outbreaks – Maine, 2017-18 Influenza Season

- # new outbreaks: 0
- Total outbreaks 2017-18 season: 141

**Influenza-Like Illness Outbreaks by Facility Type – Maine, 2017-18**




**Outbreak Facility Type Key:**

LTC - Long Term Care Facility
AC - Acute Care Facility (nosocomial)
K12 - School (K-12) or daycare
Univ - School (residential) or University
HCW - Health care workers
Inst - Other institutions (workplaces, correctional facilities etc)
Camp - Camp

## Influenza-Like Illness Outbreak by Facility Type and County – Maine, 2017-18

| County | LTC | AC | K12 | Univ | HCW | Inst | Camp | Total |
|---|---|---|---|---|---|---|---|---|
| Androscoggin | 7 | 3 | 2 | 0 | 0 | 0 | 0 | 12 |
| Aroostook | 5 | 1 | 0 | 1 | 0 | 0 | 0 | 7 |
| Cumberland | 30 | 3 | 1 | 0 | 0 | 0 | 0 | 34 |
| Franklin | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Hancock | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| Kennebec | 8 | 1 | 2 | 0 | 0 | 0 | 0 | 11 |
| Knox | 5 | 1 | 0 | 0 | 0 | 3 | 0 | 9 |
| Lincoln | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| Oxford | 7 | 0 | 1 | 0 | 0 | 0 | 0 | 8 |
| Penobscot | 15 | 0 | 0 | 0 | 0 | 1 | 0 | 16 |
| Piscataquis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Sagadahoc | 4 | 0 | 0 | 0 | 0 | 0 | 0 | 4 |
| Somerset | 5 | 0 | 2 | 0 | 0 | 0 | 0 | 7 |
| Waldo | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Washington | 4 | 0 | 0 | 0 | 0 | 0 | 0 | 4 |
| York | 21 | 1 | 2 | 0 | 0 | 0 | 0 | 24 |
| **Total** | **116** | **10** | **10** | **1** | **0** | **4** | **0** | **141** |

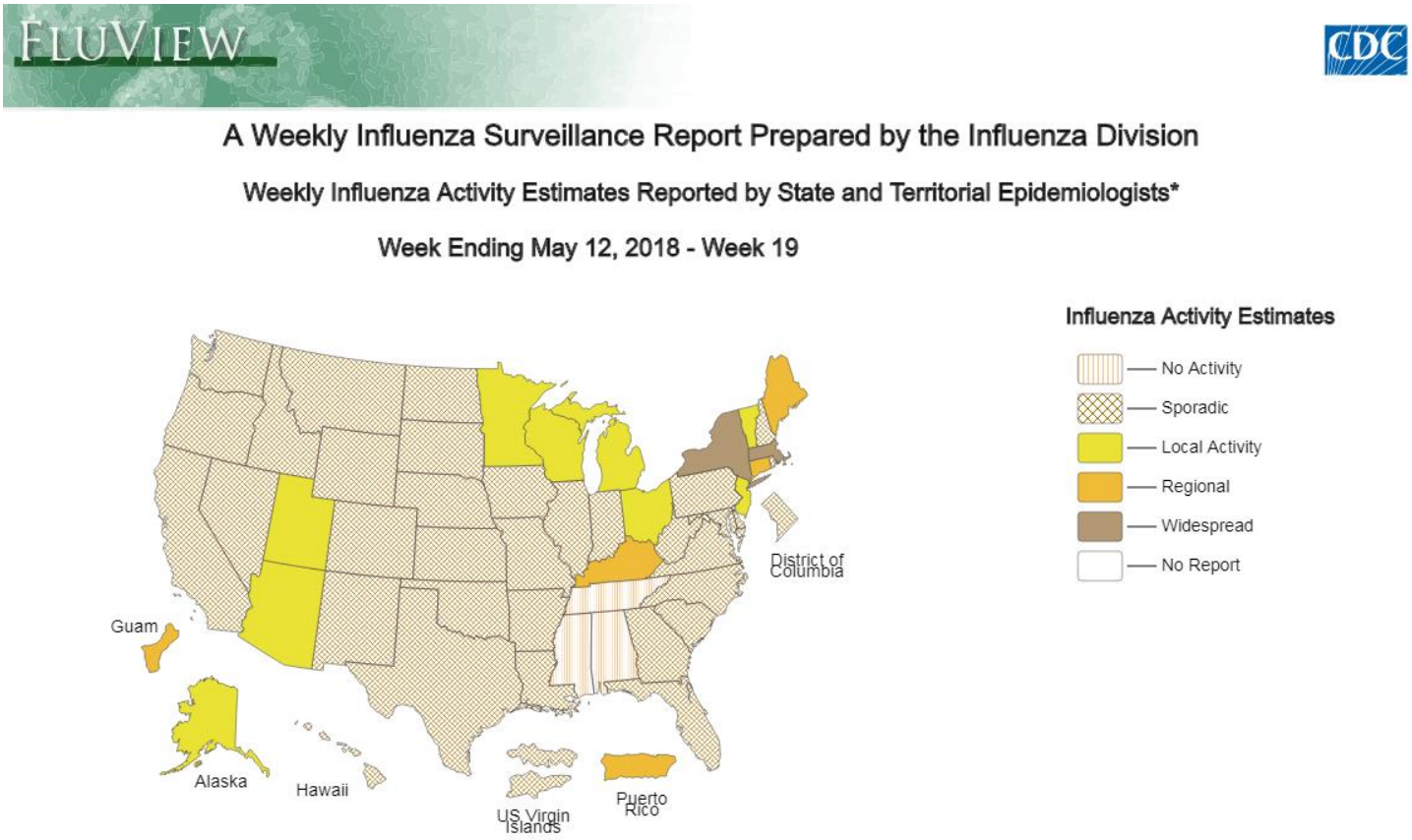
**Influenza Deaths**
This number represents the number of individuals who had influenza specifically listed on their death certificate. This is likely an underrepresentation of the true burden as many influenza-associated deaths are due to secondary infections which is why the Pneumonia and Influenza (P&I) death information is on page 1 of this report.

- # deaths reported this week: 0
- Total influenza deaths 2017-18 season: 82

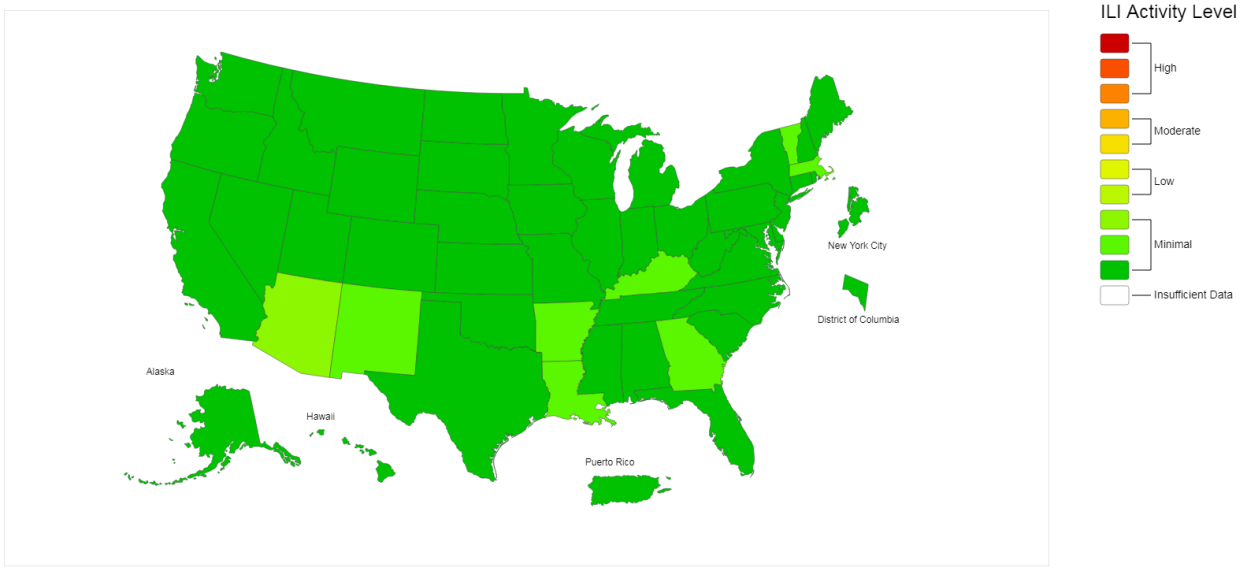
**Pediatric Influenza Deaths**

- No pediatric influenza-associated deaths reported in Maine during the 2017-18 influenza season

**National Influenza Surveillance Data**
Source: http://www.cdc.gov/flu/weekly/



## 2017-18 Influenza Season Week 19 ending May 12, 2018




*This map uses the proportion of outpatient visits to healthcare providers for influenza-like illness to measure the ILI activity level within a state. It does not, however, measure the extent of geographic spread of flu within a state. Therefore, outbreaks occurring in a single city could cause the state to display high activity levels.
*Data collected in ILINet may disproportionately represent certain populations within a state, and therefore may not accurately depict the full picture of influenza activity for the whole state.
*Data displayed in this map are based on data collected in ILINet, whereas the State and Territorial flu activity map are based on reports from state and territorial epidemiologists. The data presented in this map is preliminary and may change as more data is received.
*Differences in the data presented by CDC and state health departments likely represent differing levels of data completeness with data presented by the state likely being the more complete.
*For the data download you can use Activity Level for the number and Activity Level Label for the text description.